Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself				
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	About Debtor 2 (Spouse Only in a Joint Case):	
1.	You	r full name				
	your	e the name that is on government-issued tre identification (for	Joel First name	First name	First name	
		nple, your driver's use or passport).	Middle name	Middle name	Middle name	
		g your picture	Rivera			
	identification to your meeting with the trustee.		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.		other names you have d in the last 8 years				
	maio assu	ide your married or den names and any imed, trade names and g business as names.				
	any such partr	NOT list the name of separate legal entity as a corporation, nership, or LLC that is iling this petition.				
3.	you num Indi	the last 4 digits of r Social Security liber or federal vidual Taxpayer tification number	xxx-xx-9479			

Del	btor 1 Joel Rivera		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Your Employer Identification Number (EIN), if any.					
	(),) .	EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		73-14 Woodhaven Blvd, Apt. 1A Glendale, NY 11385				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Queens				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Joel Rivera		Joel Rivera	Case number (if known)							
Par	t 2:	Tell the Court About \	our Bankruptcy	Case						
7.	Bank	chapter of the cruptcy Code you are sing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	CHOO	sing to file under	Chapter 7							
			☐ Chapter 11							
			☐ Chapter 12							
			☐ Chapter 13							
8.	How	you will pay the fee	about hov order. If y	v you may pay. Typi	ically, if you are paying the fee yo	k with the clerk's office in your local courself, you may pay with cash, cashing alf, your attorney may pay with a cred	er's check, or money			
					allments. If you choose this option (Official Form 103A).	on, sign and attach the Application for	r Individuals to Pay			
			I request but is not applies to	that my fee be wai required to, waive y your family size an	ived (You may request this option rour fee, and may do so only if yo d you are unable to pay the fee in	n only if you are filing for Chapter 7. E our income is less than 150% of the of n installments). If you choose this opti cial Form 103B) and file it with your pe	ficial poverty line that on, you must fill out			
9.		you filed for ruptcy within the	■ No.							
	last 8	3 years?	☐ Yes.							
			Distr		When					
			Distr		When When	Case number Case number				
			Distr	ici	when	Case number				
10.		iny bankruptcy s pending or being	■ No							
	filed not fi you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.							
			Debt	or		Relationship to you				
			Distr	ict	When	Case number, if known				
			Debt			Relationship to you				
			Distr	ict	When	Case number, if known				
11.		ou rent your	□ No. Go	to line 12.						
	resia	ence?	■ Yes. Has	s your landlord obta	ined an eviction judgment agains	et you?				
			•	No. Go to line 1	12.					
				Yes. Fill out <i>Init</i> bankruptcy peti		Judgment Against You (Form 101A) a	and file it with this			

Deb	otor 1 Joel Rivera				Case number (if known)
Par	Report About Any Bu	ısinesses	You Owr	ı as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busing	ness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	- 0. 7/D O. d.
	If you have more than one sole proprietorship, use a separate sheet and attach		Numi	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small</i> <i>business debtor</i> , see 11	proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that yo you are choosing to proceed under Subchapter V, you must attach your most recent balance cash-flow statement, and federal income tax return or if any of these documents do not exist \$ 1116(1)(B). I am not filing under Chapter 11.		can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, see tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.	
	U.S.C. § 101(51D).	☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	Report if You Own or	Have Any	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property?		s the property?		
					Number, Street, City, State & Zip Code

Debtor 1 Joel Rivera Case number (if known)

Part 5: Explain Your

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Joel Rivera				Case number (if known)				
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe the	at are not consumer debts or business of	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you	1 -49		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000			
	owe?	□ 50-99 □ 100-1 □ 200-9	99	☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?			□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$	350,000 001 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	to be?	■ \$100,001 - \$100,000 □ \$500,001 - \$1 million		\$50,000,001 - \$100 million \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help n document, I have obtained and read the notice required by 11 U.S.C. § 342(b).			n attorney to help me fill out this					
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				ed in this petition.				
		Joel Ri		Signature of Debtor 2				
		Executed		Executed on MM / I	DD / YYYY			

Debtor 1 Joel Rivera		Case	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have ex	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	, certify that I have no knowl	ledge after an inquiry that the information in the		
	/s/ Darren Aronow	Date	July 24, 2023		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Darren Aronow 4094074				
	Printed name				
	Aronow Law, P.C.				
	Firm name				
	7600 Jericho Turnpike				
	Suite 115				
	Woodbury, NY 11797				
	Number, Street, City, State & ZIP Code				
	Contact phone 516-762-6701	Email address	darren@dalawpc.com		
	4094074 NY				
	Bar number & State		<u> </u>		

Fill	in this infor	mation to identify your	case:				
Deb	otor 1	Joel Rivera					
Dah	otor O	First Name	Middle Name	Last Name			
1 -	otor 2 use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States B	ankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Cas (if kn	se number own)					☐ Check	if this is an
						amend	ed filing
		orm 106Sum					
				nd Certain Statistical I			2/15
info	rmation. Fill	out all of your schedu	les first; then complete t	e are filing together, both are equanche information on this form. If you to the box at the top of this page.			
Par	t 1: Sumr	narize Your Assets					
						Your as Value of	sets what you own
1.	Schedule 1a. Copy li	A/B: Property (Official Fine 55, Total real estate,	form 106A/B) from Schedule A/B			\$	0.00
	1b. Copy li	ne 62, Total personal pro	operty, from Schedule A/B			\$	26,707.21
	1c. Copy li	ne 63, Total of all proper	ty on Schedule A/B			\$	26,707.21
Par	t 2: Sumr	marize Your Liabilities					
						Your lia	bilities you owe
_						Amount	you owe
2.			Claims Secured by Propert Imn A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of Part	1 of Schedule D	\$	25,137.00
3.	Schedule L 3a. Copy t	E/F: Creditors Who Have the total claims from Part	Unsecured Claims (Official 1 (priority unsecured claims)	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy t	he total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F.		\$	84,649.43
				Yo	our total liabilities	\$	109,786.43
Par	t 3: Sumr	narize Your Income and	d Expenses				
4.		: Your Income (Official Football Footba		le I		\$	1,947.45
5.		I: Your Expenses (Official monthly expenses from I				\$	2,632.77
Par	t 4: Answ	ver These Questions for	r Administrative and Sta	tistical Records			
6.	Are vou fil	ling for bankruptcy und	ler Chapters 7, 11, or 13	?			
0.	-		•	Check this box and submit this form t	to the court with you	ur other sch	edules.
7.	YesWhat kind	of debt do you have?					
				debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by an indigent of the debts are those "incurred by a constant of the debts are those "incurred by a constant of the debts are those "incurred by a constant of the debts are those "incurred by a constant of the debts are those "incurred by a constant of the debts are the debts are the debts are those "incurred by a constant of the debts are the debt		a personal,	family, or
		debts are not primarily ourt with your other sched		ave nothing to report on this part of the	he form. Check this	box and su	bmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 **Joel Rivera** Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,426.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this	information to identif		nd thin filings			
Fill in this	information to identif	ry your case a	na this filing:			
Debtor 1	Joel Rivera					
Dobtor 2	First Name		Middle Name	Last Name		
Debtor 2 (Spouse, if filir	ng) First Name		Middle Name	Last Name		
United Sta	tes Bankruptcy Court fo	or the: EASTI	ERN DISTRICT OF	F NEW YORK		
Case numb	ber					☐ Check if this is an
						amended filing
Official	I Form 106A/	В				
Sche	dule A/B: P	roperty	,			12/15
			<u></u>	once. If an asset fits in more than or	e category, list the asset in	
think it fits b	est. Be as complete and If more space is needed	d accurate as po	ssible. If two marrie	ed people are filing together, both ar m. On the top of any additional page	e equally responsible for s	upplying correct
Part 1: De	scribe Each Residence,	Building, Land,	or Other Real Estate	e You Own or Have an Interest In		
1. Do you o	wn or have any legal or e	equitable interes	at in any residence,	building, land, or similar property?		
■ No. Go	o to Part 2					
_	Where is the property?					
□ res. v	vilere is the property:					
D (0 D)						
Part 2: De	scribe Your Vehicles					
	nns, trucks, tractors, s		·	ule G: Executory Contracts and Ur	iospired Leases.	
3.1 Mak	_e . BMW		Who has an inter	rest in the property? Check one		laims or exemptions. Put
Mod	F2F:		_	est in the property. Check one	,	ed claims on Schedule D: ims Secured by Property.
Year			■ Debtor 1 only □ Debtor 2 only			
	roximate mileage:	75,000	Debtor 1 and D	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	er information:	· · · · · ·	_	the debtors and another		
Valu	ue by www.nada.co	om			440.050.00	
			☐ Check if this i (see instructions	is community property	\$16,250.00	\$16,250.00
■ No □ Yes 5 Add the pages y	s: Boats, trailers, motor	ortion you ow Part 2. Write t	tercraft, fishing ves n for all of your el that number here.	nal vehicles, other vehicles, and seels, snowmobiles, motorcycle acontries from Part 2, including any e following items?	r entries for	\$16,250.00 Current value of the portion you own?
						Do not deduct secured claims or exemptions

De	ebtor 1	Joel Rivera	Case numb	per (if known)
	Exampl ☐ No	,	urnishings ces, furniture, linens, china, kitchenware	
	■ Yes.	Describe		
			1 Bedroom Set, 1 Dining Room Set, 1 Sofa Bed, 1 Living Room Table, Tv stand, and assorted kitchenware. Location: 73-14 Woodhaven Blvd, Apt. 1A, Glendale NY 11385	\$2,000.00
7.	□ No	les: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, printers, scani phones, cameras, media players, games	ners; music collections; electronic devices
			2 Televisions, 1 Desktop Computer, 1 Laptop. Location: 73-14 Woodhaven Blvd, Apt. 1A, Glendale NY 11385	\$1,200.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects ons, memorabilia, collectibles	stamp, coin, or baseball card collections;
9.	Example No	ent for sports ar les: Sports, photo musical instru Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs,	skis; canoes and kayaks; carpentry tools;
10.	■ No		s, shotguns, ammunition, and related equipment	
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Everyday Miscellaneous Clothing. Location: 73-14 Woodhaven Blvd, Apt. 1A, Glendale NY 11385	\$800.00
12.	□ No [′]		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watc	hes, gems, gold, silver
			1 Watch. Location: 73-14 Woodhaven Blvd, Apt. 1A, Glendale NY 11385	\$15.00
	Examp ■ No	orm animals oles: Dogs, cats, b	pirds, horses	
	■ No	her personal and	d household items you did not already list, including any health aids you d	id not list

De	ebtor 1	Joel Rivera		Case number (if known)
15			es from Part 3, including any entries t		\$4,015.00
Pa	rt 4: Dec	scribe Your Financial Assets			
		vn or have any legal or equitable i	interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	oles: Money you have in your wallet,	in your home, in a safe deposit box, and	d on hand when you file your pet	ition
				Cash	\$50.00
17.	Examp □ No		ancial accounts; certificates of deposit; se accounts with the same institution, list Institution name:		houses, and other similar
			Bank of America		
		17.1. Checki	ing Account ending in	9751	\$288.00
	□ No ´	Institution Morgan	nts with brokerage firms, money market and or issuer name: Stanley EXP, Etrade Account tending in 1657/4831	accounts	\$5,558.21
		ublicly traded stock and interests renture	in incorporated and unincorporated b	ousinesses, including an intere	est in an LLC, partnership, and
	■ Yes.	Give specific information about the Name of entit		% of ownership:	
		Results Ma No Assets	rketing Group, LLC	%	\$0.00
	Negoti Non-ne ■ No	<i>iable instrument</i> s include personal c		es, and money orders.	
21.	_Examp	ment or pension accounts oles: Interests in IRA, ERISA, Keogh	n, 401(k), 403(b), thrift savings accounts,	or other pension or profit-sharin	g plans
	■ No □ Yes.	List each account separately. Type of account	t: Institution name:		
	Your s	ty deposits and prepayments hare of all unused deposits you havoles: Agreements with landlords, pre	e made so that you may continue service paid rent, public utilities (electric, gas, w	e or use from a company ater), telecommunications compa	anies, or others

Debtor 1	Joel Rivera			ase number (if known)	
□Ye	es	Institution n	name or individual:		
	,	or a periodic payment of money to you, either for	r life or for a number of	years)	
■ No		ssuer name and description.			
		ion IRA, in an account in a qualified ABLE pro 529A(b), and 529(b)(1).	ogram, or under a qua	lified state tuition progra	am.
■ No	•	nstitution name and description. Separately file th	ne records of any intere	sts.11 U.S.C. § 521(c):	
■ No)	uture interests in property (other than anythin formation about them	g listed in line 1), and	rights or powers exerci	sable for your benefit
Exa ■ No	amples: Internet do	rademarks, trade secrets, and other intellectumain names, websites, proceeds from royalties a formation about them		is	
Exa ■ No	<i>amples:</i> Building pe	and other general intangibles rmits, exclusive licenses, cooperative association formation about them	n holdings, liquor licens	es, professional licenses	
Money	or property owed	to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		you formation about them, including whether you alre	ady filed the returns an	d the tax years	
		2022/2021 Tax Refund		Federal/State	\$546.00
Exa ■ No	•	r lump sum alimony, spousal support, child support	ort, maintenance, divord	e settlement, property set	ttlement
Exa ■ No	benefits; ur	ges, disability insurance payments, disability ben npaid loans you made to someone else	efits, sick pay, vacation	pay, workers' compensa	tion, Social Security
31. Inter	rests in insurance amples: Health, disa		HSA); credit, homeown	er's, or renter's insurance	
		ance company of each policy and list its value. Company name:	Beneficiar	y:	Surrender or refund value:
		State Farm Term Life Insurance Po ending in 0055; No Cash Value	licy Family		\$0.00

Debtor	Joel Rivera Case number (if kno	wn)
If y	interest in property that is due you from someone who has died but are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to be a died.	receive property because
■ N		
ΠY	es. Give specific information	
Ex. ■ N	ms against third parties, whether or not you have filed a lawsuit or made a demand for payment imples: Accidents, employment disputes, insurance claims, or rights to sue ones. Describe each claim	
	er contingent and unliquidated claims of every nature, including counterclaims of the debtor and righ	s to set off claims
■ N		
ΠY	es. Describe each claim	
35. Any ■ N	financial assets you did not already list	
ы і	es. Give specific information	
	d the dollar value of all of your entries from Part 4, including any entries for pages you have attached Part 4. Write that number here	\$6,442.21
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do y	ou own or have any legal or equitable interest in any business-related property?	
■ No	Go to Part 6.	
☐ Ye	. Go to line 38.	
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do	rou own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	No. Go to Part 7.	
	es. Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	rou have other property of any kind you did not already list?	
■ N	•	
_	es. Give specific information	
54. A c	d the dollar value of all of your entries from Part 7. Write that number here	\$0.00
	-	

Joel Rivera		Case number (if known)	
List the Totals of Each Part of this Form			
rt 1: Total real estate, line 2			\$0.00
rt 2: Total vehicles, line 5	\$16,250.00		
rt 3: Total personal and household items, line 15	\$4,015.00		
rt 4: Total financial assets, line 36	\$6,442.21		
rt 5: Total business-related property, line 45	\$0.00		
rt 6: Total farm- and fishing-related property, line 52	\$0.00		
rt 7: Total other property not listed, line 54	+ \$0.00		
tal personal property. Add lines 56 through 61	\$26,707.21	Copy personal property total	\$26,707.21
tal of all property on Schedule A/B. Add line 55 + line 62			\$26,707.21
rrr	List the Totals of Each Part of this Form 1 1: Total real estate, line 2	List the Totals of Each Part of this Form t 1: Total real estate, line 2	List the Totals of Each Part of this Form t 1: Total real estate, line 2

Fil	l in this inform	nation to identify your c	case:				1
De	btor 1	Joel Rivera					
De	btor 2	First Name	Middl	e Name	L	ast Name	
	ouse if, filing)	First Name	Middl	e Name	L	ast Name	
Un	ited States Bar	nkruptcy Court for the:	EASTER	N DISTRICT OF N	EW Y	ORK	
	nse number						☐ Check if this is an amended filing
Oí	fficial Fo	rm 106C					-
S	chedule	e C: The Pro	pert	y You Cla	im	as Exempt	4/22
the nee cas For speany function	property you listed and the fill out and the number (if known each item of pecific dollar and the applicable statement applicable statement applicable app	sted on Schedule A/B: P.d attach to this page as nown). property you claim as enount as exempt. Alternatutory limit. Some exenlimited in dollar amount articular dollar amount	exempt, young to many copie exempt, young to matively, young to matively, young to make the work of th	ficial Form 106A/B) s of Part 2: Addition ou must specify the bu may claim the force, if you claim and rer, if you claim and and the force, if you claim and the force, if you claim and the force, if you claim and the force.	as yo nal Pa e amo full fai healt exen	our source, list the property that you ige as necessary. On the top of any ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain b inption of 100% of fair market valu	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement
		statutory amount. y the Property You Clai	im as Exei	mpt			
1.	Which set of	exemptions are you cla	aiming? C	check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are cla	aiming state and federal	nonbankru	ptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are cla	aiming federal exemption	ns. 11 U.S	.C. § 522(b)(2)			
2.	For any prop	erty you list on <i>Schedu</i>	ule A/B tha	nt you claim as exe	empt,	fill in the information below.	
		on of the property and line		urrent value of the	Am	ount of the exemption you claim	Specific laws that allow exemption
	Scriedule A/B	that lists this property	С	ortion you own opy the value from chedule A/B	Che	eck only one box for each exemption.	
		Set, 1 Dining Room		\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
	stand, and a Location: 7 Apt. 1A, Gle	Sofa Bed, 1 Living Room Table, stand, and assorted kitchenwar socation: 73-14 Woodhaven Blv Apt. 1A, Glendale NY 11385 sine from Schedule A/B: 6.1	e.			100% of fair market value, up to any applicable statutory limit	
		ns, 1 Desktop Comp	uter, 1	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(3)
	Apt. 1A, Gle	3-14 Woodhaven Blv endale NY 11385 nedule A/B: 7.1	/d,			100% of fair market value, up to any applicable statutory limit	
		liscellaneous Clothir		\$800.00		\$800.00	11 U.S.C. § 522(d)(3)
	Apt. 1A, Gle	3-14 Woodhaven Blv endale NY 11385 nedule A/B: 11.1	ru, —			100% of fair market value, up to any applicable statutory limit	
	1 Watch.	3-14 Woodhayan Bly	/d	\$15.00		\$15.00	11 U.S.C. § 522(d)(4)

Apt. 1A, Glendale NY 11385

Line from Schedule A/B: 12.1

 \square 100% of fair market value, up to

any applicable statutory limit

Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
	Line Holli Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Bank of America Account ending in 9751	\$288.00		\$288.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Morgan Stanley EXP, Etrade Account Account ending in 1657/4831	\$5,558.21		\$5,558.21	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit	
	Federal/State: 2022/2021 Tax Refund Line from Schedule A/B: 28.1	\$546.00		\$546.00	11 U.S.C. § 522(d)(5)
	Ellie Holli Genedale Av.B. 2011			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Debtor 1 Joel Rivera

Fill in this informati	on to identify you	ır case:			
	Joel Rivera First Name	Middle Name Last Nam	e	-	
Debtor 2	First Name	Middle Name Last Nam		-	
United States Bankru	uptcy Court for the	EASTERN DISTRICT OF NEW YORK		_	
Case number (if known)				_	if this is an
Official Form 1	06D				
		Who Have Claims Secu	red by Propert	:y	12/15
		If two married people are filing together, both a out, number the entries, and attach it to this for			
1. Do any creditors hav	e claims secured by	y your property?			
☐ No. Check this	s box and submit t	his form to the court with your other schedule	s. You have nothing else	to report on this form.	
_	of the information	·	· ·	•	
	ecured Claims	bolow.			
			. Column A	Column B	Column C
for each claim. If more	than one creditor has	more than one secured claim, list the creditor sepal a particular claim, list the other creditors in Part 2. cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion
2.1 Pentagon FC	U	Describe the property that secures the claim:	\$25,137.00	\$16,250.00	\$8,887.00
Creditor's Name		2016 BMW 535i 75,000 miles Value by www.nada.com			
Attn: Bankru Po Box 1432 Alexandria, \		As of the date you file, the claim is: Check all th apply. Contingent	 at		
Number, Street, City		☐ Unliquidated			
Who owes the debt?	Check one.	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mortgage of car loan)	or secured		
☐ Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the d	ebtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim community debt	relates to a	Other (including a right to offset) Automotion	otive		
Date debt was incurre	Opened 04/23 Last Active d 6/30/23	Last 4 digits of account number 79	64		
	of your entries in C	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$25,1 \$25,1		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

					1
Fill in this in	formation to identify your	case:			
Debtor 1	Joel Rivera				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
			OT OF MENU (OD)		
United States	Bankruptcy Court for the:	EASTERN DISTRI	CT OF NEW YORK		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Ea	orm 106E/F				
		// 11a 11a.a	Ola!		40/45
	E/F: Creditors W				12/15 NPRIORITY claims. List the other party
Schedule G: Ex Schedule D: Cr left. Attach the	ecutory Contracts and Unexpeditors Who Have Claims Sec	oired Leases (Official F cured by Property. If mo	orm 106G). Do not include ore space is needed, copy t	any creditors with partially s he Part you need, fill it out,	Property (Official Form 106A/B) and on secured claims that are listed in number the entries in the boxes on the top of any additional pages, write your
Part 1: Lis	at All of Your PRIORITY Ur	secured Claims			
1. Do any cre	editors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
☐ Yes.					
	editors have nonpriority unsect that have nothing to report in this p			edules.	
Yes.					
unsecured	claim, list the creditor separatel	y for each claim. For each	ch claim listed, identify what t	ype of claim it is. Do not list cl	tor has more than one nonpriority laims already included in Part 1. If more claims fill out the Continuation Page of
					Total claim
4.1 Bard	lays Bank Delaware	Last 4	digits of account number	3151	\$7,697.00
	iority Creditor's Name				
	: Bankruptcy	147		Opened 09/21 Last	Active
_	South West St nington, DE 19801	wnen	was the debt incurred?	06/23	
	er Street City State Zip Code	As of t	he date you file, the claim i	s: Check all that apply	
Who i	ncurred the debt? Check one.		-		
■ De	ebtor 1 only	☐ Cor	ntingent		
_	btor 2 only		iquidated		
	ebtor 1 and Debtor 2 only	☐ Dis	·		
	least one of the debtors and an	_	of NONPRIORITY unsecured	l claim:	
	eck if this claim is for a com	Пон	dent loans		
debt	claim subject to offset?	□ ОЫ	igations arising out of a sepa	ration agreement or divorce the	nat you did not
■ No	•		. ,	g plans, and other similar deb	uts.
☐ Ye			·	• •	
∟ Ye	S	Oth	er. Specify Credit Card	I	

Debtor	1 Joel Rivera	Case number (if known)			
4.2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	1215	\$1,139.00	
	Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/22 Last Active 07/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.3	Citibank	Last 4 digits of account number	3860	\$6,904.00	
	Nonpriority Creditor's Name Citicorp Cr Srvs Attn: Bankruptcy Po Box 790040	When was the debt incurred?	Opened 04/22 Last Active 4/14/23		
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Credit Card	<u> </u>		
4.4	Citibank	Last 4 digits of account number	1282	\$443.00	
	Nonpriority Creditor's Name Citicorp Cr Srvs Attn: Bankruptcy Po Box 790040	When was the debt incurred?	Opened 12/22 Last Active 7/01/23		
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 2 only Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	□ Yes				
	□ 162	■ Other. Specify Credit Card			

Debtor	1 Joel Rivera	Case number (if known)					
4.5	Con Edison	Last 4 digits of account number	0149	\$1,510.43			
	Nonpriority Creditor's Name 4 Irving Place 9th floor	When was the debt incurred?	2023				
	New York, NY 10003 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Utility com	pany				
4.6	Credit One Bank	Last 4 digits of account number	0882	\$770.00			
	Nonpriority Creditor's Name Po Box 98872	When was the debt incurred?	Opened 12/22 Last Active 6/23/23				
	Las Vegas, NV 89193						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	-	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No	Debts to pension or profit-sharing					
	☐ Yes	Other. Specify Credit Card	<u> </u>				
4.7	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	0338	\$5,990.00			
	Attn: Bankruptcy Po Box 3025	When was the debt incurred?	Opened 10/22 Last Active 07/23				
	New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify Credit Card	<u> </u>				

Debtor	1 Joel Rivera	Case number (if known)			
4.8	Fortiva	Last 4 digits of account number	1483	\$2,891.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 105555 Atlanta, GA 30348	When was the debt incurred?	Opened 09/19 Last Active 04/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separations.	d claim: Iration agreement or divorce that you did not		
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	g plans, and other similar debts		
	Yes	Other. Specify Credit Card			
4.9	Genesis FS Card Svs.	Last 4 digits of account number	8955	\$337.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 04/23 Last Active 07/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	,		
4.1					
0	Genesis FS Card Svs. Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$334.00	
	Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 04/23 Last Active 07/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card			

Debto	Joel Rivera		Case number (if known)			
4.1	Green Dot Bank	Last 4 digits of account number	4667	\$386.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5100 Pasadena, CA 91117	When was the debt incurred?	Opened 05/19 Last Active 7/05/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Line	Secured			
4.1	K.L. Nonpriority Creditor's Name	Last 4 digits of account number	2021	\$0.00		
	c/o Daniel Szalkiewicz 23 W 73rd Street	When was the debt incurred?	2021			
	New York, NY 10023 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	_					
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Civil Law S	uit - Notice			
4.1	Rutledge Apartments LLC	Last 4 digits of account number	22QU	\$54,180.00		
	Nonpriority Creditor's Name 62-25 Woodhaven Blvd Rego Park, NY 11374	When was the debt incurred?	2022			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Rent due from March 2020-July 2023				

Debtor 1 Joel Rivera		ra	Case number (if known)						
4.1									
4	ΓD Bank, N		Last 4 digits of account numbe	r 9278	<u> </u>		\$2,068.00		
	Nonpriority Cred			On an ad 04/00 Last Astina					
	Attn: Bankr 701 Rt 70		When was the debt incurred?	07/23	ned 01/23 Last Act	live			
-	Cherry Hill,		mion was the dest mountain.	0172	<u>, </u>				
		City State Zip Code	As of the date you file, the clair	n is: Checl	к all that apply				
V	Vho incurred t	the debt? Check one.							
	Debtor 1 onl	ly	☐ Contingent						
[Debtor 2 onl	ly	☐ Unliquidated						
[Debtor 1 and	d Debtor 2 only	☐ Disputed						
Γ	At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:					
☐ Check if this claim is for a community			☐ Student loans						
	lebt	is claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not						
Is the claim subject to offset? ■ No			report as priority claims		,				
			Debts to pension or profit-sha	ring plans,	and other similar debts				
Yes			Other. Specify Credit Ca	rd					
Part 3:	List Others	s to Be Notified About a D	ebt That You Already Listed						
			about your bankruptcy, for a debt tha	t vou alrea	adv listed in Parts 1 or 2	For example if a	collection agency		
is trying	to collect fro	m you for a debt you owe to s	someone else, list the original creditor	in Parts 1	or 2, then list the collec	ction agency here.	Similarly, if you		
have mo	ore than one of	creditor for any of the debts the in Parts 1 or 2, do not fill out	at you listed in Parts 1 or 2, list the ad	ditional cr	editors here. If you do r	not have additional	l persons to be		
Name and			On which entry in Part 1 or Part 2 did yo	ou list the c	original creditor?				
	S. Szalkiew	vicz		·					
_	ehurst Ave	enue		■ Part 2: Creditors with Nonpriority Unsecured Claims					
A44	NIV 400	00			,				
New Yo	ork, NY 100	33	Last 4 digits of account number	2	021				
Name and			On which entry in Part 1 or Part 2 did yo		-				
	\. Shapiro Queens Bl\	امر	Line 4.12 of (Check one):						
Suite 40		vu.	■ Part 2: Creditors with Nonpriority Unsecured Claims						
	Hills, NY 11	1375							
	·		Last 4 digits of account number						
Name and	l Address		On which entry in Part 1 or Part 2 did yo	ou list the c	original creditor?				
Horing	Welikson F				Creditors with Priority Un:	secured Claims			
	ide Avenue			Part 2:	Creditors with Nonpriority	/ Unsecured Claims			
Willisto	n Park, NY	11596	Last 4 digits of account number	_					
			Last 4 digits of account number		2qu				
Name and	Address		On which entry in Part 1 or Part 2 did yo	ou list the c	original creditor?				
	County or		Line <u>4.13</u> of (<i>Check one</i>):	Part 1:	Creditors with Priority Un:	secured Claims			
	utphin Blv			Part 2:	Creditors with Nonpriority	/ Unsecured Claims			
Jamaic	a, NY 1143	0	Last 4 digits of account number						
Part 4:	Add the Ar	mounts for Each Type of U	Insecured Claim						
			aims. This information is for statistica	l reporting	purposes only. 28 U.S.	C. §159. Add the a	mounts for each		
type of	unsecured cla	aim.							
	2	Demostic assumed at the st		٥.	Total Clain				
6a. Domestic support obligation:		Domestic support obligation	ns	6a.	\$	0.00			
Total claims									
from Part		Taxes and certain other deb		6b.	\$	0.00			
	6c.		Il injury while you were intoxicated	6c.	\$	0.00			
	6d.	other. Add all other priority ur	nsecured claims. Write that amount here.	6d.	\$	0.00			
	6e.	Total Priority. Add lines 6a th	arough 6d	6e.	\$	0.00			
	UG.	. July . Hour miles od li	nougn ou.	oc.	ĮΨ	0.00			

0.00

Debtor 1 Joel Rivera

Case number (if known)

				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 84,649.43
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 84,649.43

Fill in this infor	mation to identify your	case:		
Debtor 1	Joel Rivera			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease ^o Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

ebtor 1	Joel Rivera				
	First Name	Middle Name	Last Name		
ebtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
nited States B	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
ase number					☐ Check if this is an
	orm 106H				amended filing
chedule	H: Your Cod	ebtors			12/15
■ No	nave any codebtors? (If	you are filing a joint case, o	do not list either spouse	e as a codebtor.	
☐ Yes					
Arizona, Ca	ilifornia, Idaho, Louisiana o line 3.	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
	your spouse, former spo	use, or legal equivalent live	with you at the time?		
	ain as a codebtor only i), Schedule E/F (Officia		tor or cosigner. Make	sure you have listed the	with you. List the person show
Form 106D out Column Colum	mn 1: Your codebtor Number, Street, City, State and Z	1P Code			litor to whom you owe the debt
Form 106D out Column Column Name,		IP Code		Check all schedules	litor to whom you owe the debt that apply:
Form 106D out Column		IP Code		Check all schedules Schedule D, line	ditor to whom you owe the debt that apply:
Form 106D out Column Name,		IP Code		Check all schedules	ditor to whom you owe the debte that apply:
Form 106D out Column Column Name,	Number, Street, City, State and Z	IP Code		Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line	ditor to whom you owe the debte that apply:
Form 106D out Column Column Name,	Number, Street, City, State and Z	IP Code State	ZIP Code	Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line	ditor to whom you owe the deboto that apply:
Form 106D out Column Name, 3.1 Name Number City	Number, Street, City, State and Z		ZIP Code	Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ditor to whom you owe the debte that apply:
Form 106D out Column Name, 3.1 Name	Number, Street, City, State and Z		ZIP Code	Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line	ditor to whom you owe the debte that apply:
Column Name, 3.1 Name Number City	Number, Street, City, State and Z		ZIP Code	Check all schedules □ Schedule D, line □ Schedule E/F, line □ Schedule G, line □ Schedule D, line	ditor to whom you owe the deb
Column Name, 3.1 Name Number City	Number, Street, City, State and Z		ZIP Code	Check all schedules Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line	ditor to whom you owe the deb

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill	in this information to identify your c	ase:								
Del	otor 1 Joel Rivera				_					
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF NEW YORK		_					
	se number nown)					□ A		ed filing ent sho	wing postpetition ne following date:	
0	fficial Form 106I					_	1M / DD/ `		io renoving date.	
S	chedule I: Your Inc	ome				ıv	IIVI / DD/			12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing w	ith you, do not incli	ude inforn	natio	n about	your sp	ouse. If	more space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed				☐ Employed			
		Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Home-Aid							
	Include part-time, seasonal, or self-employed work.	Employer's name	Continental Ho	me Care)					
	Occupation may include student or homemaker, if it applies.	Employer's address	116-55 Queens Forest Hills, N		uite	224				
		How long employed t	here? 1 mon	th						
Par	t 2: Give Details About Mor	nthly Income					_			
Esti spoi	mate monthly income as of the duse unless you are separated.	ate you file this form. If		·	-				·	-
•	u or your non-filing spouse have me e space, attach a separate sheet to	, ,	ombine the information	on for all e	mpic	yers for	that perso	on on th	ie lines below. If	you need
						For Del	otor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2	,426.67	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,42	26.67	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Debt	or 1	Joel Rivera		Case	number (if known)			
				For	Debtor 1	For Deb	otor 2 or	
	Сор	y line 4 here	4.	\$	2,426.67	\$	N/A	
5.	List	all payroll deductions:						
-	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	479.22	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	\$	479.22	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,947.45	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		1,947.45 + \$	N	/A = \$	1,947.45
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						,-
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not accify:	depend		•	ed in <i>Sche</i>	<i>dule J</i> . 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies				, if it	2. \$Combin	1,947.45 ed
13.	Dos	ou expect an increase or decrease within the year after you file this form	2				monthly	/ income
13.	=	No.	•					
	_	Yes. Explain:						
		1 03. Explain.						

Official Form 106l Schedule I: Your Income page 2

Debtor 1 Joel Rivera Check if this is:	Fill	in this information to identify your case:				
A supplement showing postpetition chapter (Spouse, if filing) 13 expenses as of the following date:	Deb	tor 1 Joel Rivera				
Case number ((It known) Commonship Comm				_ A	supplement show	
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Pyes. Fill out this information for each dependent	Unit	ed States Bankruptcy Court for the: _EASTERN DISTRICT OF NEW YOR	RK	N	IM / DD / YYYY	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Rangle Describe Your Household						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Another Describe Your Household						
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not state the dependents names. Do not state the dependents names. No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes Stimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.						12/15
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. No Do not state the dependents names. No Yes No Yes No Yes No No Yes No No Yes No	info	ormation. If more space is needed, attach another sheet to this for				
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent						
No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Pyes. Fill out this information for Debtor 1 or Debtor 2 Pyes. Pyes Dependent's relationship to Debtor 1 or Debtor 2 Pyes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes Yes		■ No. Go to line 2.				
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. No yes No Yes No Yes Part 2: Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income Your expenses O.000		□ No	or Separate House	<i>hold</i> of Debto	r 2.	
Debtor 2. Do not state the dependents names. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. Debtor 1 or Debtor 2 age No No Yes No Yes No Yes Setimate Your Ongoing Monthly Expenses No Yes No Yes Ves Ves	2.	Do you have dependents? ■ No				
dependents names. Yes No Yes		□ 1C3.				
Do your expenses include expenses of people other than yourself and your dependents? Setimate Your Ongoing Monthly Expenses						
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00						
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00						
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00						
3. Do your expenses include expenses of people other than yourself and your dependents? Yes Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$						
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : <i>Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00						
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$	3.	expenses of people other than				
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00	Est exp	imate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a supple				
payments and any rent for the ground or lot. 4. \$	the	value of such assistance and have included it on Schedule I: You			Your expe	enses
If not included in line 4:	4.		lude first mortgage	4. \$		0.00
4a. Real estate taxes 4a. \$ 0.00		4a. Real estate taxes		4a. \$		0.00
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00						
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00						
4d. Homeowner's association or condominium dues 4d. \$ 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0,00	5		e equity loans			

131.00 0.00 325.00 0.00 475.00 0.00 80.00 75.00 60.00 250.00 150.00 0.00
0.00 325.00 0.00 475.00 0.00 80.00 75.00 60.00 250.00 150.00 0.00
0.00 325.00 0.00 475.00 0.00 80.00 75.00 60.00 250.00 150.00 0.00
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80.00 75.00 60.00 250.00 150.00 0.00
75.00 60.00 250.00 150.00 0.00
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133.54
0.00
295.00
0.00
0.00
442.23
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
25.00
191.00
2,632.77
2 622 77
2,632.77
1,947.45
2,632.77
605.33
-685.32
decrease because of a

Fill in this infor	rmation to identify your	case:			
Debtor 1	Joel Rivera				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	i list ivallie				
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case number					
(if known)				_	neck if this is an nended filing
Official For		ın Individual I	Dobtor's So	bodulos	
Declara	lion About a	in marviduai	Depiol 2 30	nedules	12/15
	18 U.S.C. §§ 152, 1341, 1 gn Below	519, and 5571.			
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petitio Declaration, and Signatur	
•	alty of perjury, I declare re true and correct.	that I have read the summ	ary and schedules file	d with this declaration and	
X /s/ Joe	el Rivera		X		
Joel R			Signature of	Debtor 2	
Signatu	ure of Debtor 1		-		
Date	July 24, 2023		Date		

Fill	in this ir	nformation to identify you	case:						
	btor 1	Joel Rivera							
		First Name	Middle Name	Last Name					
	btor 2 buse if, filing)	First Name	Middle Name	Last Name					
Lini	ited State	s Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK					
Oil	ileu Siale	s bankruptcy Court for the.	LAGILIAN DIGITATOR	TVLVV TOTAL					
1	se numbe	ır			-	Check if this is an mended filing			
Of	ficial	Form 107							
St	ateme	ent of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22			
info nun	rmation. nber (if kı	If more space is needed, nown). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you				
1.		your current marital statu		Elved Belole					
••	_								
	_	rried t married							
2.	During t	uring the last 3 years, have you lived anywhere other than where you live now?							
	■ No	s. List all of the places you li	ist all of the places you lived in the last 3 years. Do not include where you live now.						
	Debtor	1:	lived there	Deptor 2 Prior Ad	aress:	lived there			
3. state					ity property state or territory ico, Texas, Washington and W				
	■ No								
	☐ Yes	s. Make sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).					
Pai	rt 2 E	xplain the Sources of You	r Income						
4.	Fill in the	e total amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?			
	□ No ■ Yes	s. Fill in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		ry 1 of current year until I filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,092.00	☐ Wages, commissions, bonuses, tips	23 57.51301010)			
			☐ Operating a business		☐ Operating a business				

Debtor 1 J	oel Rivera			Cas	e number (if known)		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
			☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, comm bonuses, tips	nissions,	
			Operating a business		☐ Operating a b	usiness	
For last cale (January 1 to		31, 2022)	☐ Wages, commissions, bonuses, tips	\$20,535.00	☐ Wages, common bonuses, tips	nissions,	
			Operating a business		☐ Operating a b	usiness	
For the cale (January 1 to	ndar year be o December		☐ Wages, commissions, bonuses, tips	\$45,577.00	☐ Wages, common bonuses, tips	nissions,	
			Operating a business		☐ Operating a b	usiness	
■ No □ Yes	s. Fill in the do	etails.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions
				(before deductions and exclusions)			and exclusions)
Part 3: Lis	st Certain Pa	ayments You	Made Before You Filed for I	Bankruptcy			
6. Are eithe □ No.	Neither D individual	ebtor 1 nor E primarily for a	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debt d purpose."		-	(8) as "incurred by an
	_ ~	•	ore you filed for bankruptcy, di	d you pay any creditor a tota	ll of \$7,575* or more	!?	
	□ _{No.} □ _{Yes}	paid that cr	each creditor to whom you pai editor. Do not include paymen	ts for domestic support obliq			
	* Subject		payments to an attorney for the ton 4/01/25 and every 3 years		or after the date of	adjustment.	
■ Yes			or both have primarily consu ore you filed for bankruptcy, di		I of \$600 or more?		
	■ No.	Go to line 7	·.				
	□ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				
Credito	or's Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this pa	ayment for

Deb	btor 1 Joel Rivera	Case number (if known)				
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.					
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	
	rt 4: Identify Legal Actions, Repossession		paiu	Still Owe	include credit	or s name
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details. Case title					or custody
	Case number	Nature of the case	Court or agency		Status of the case	
	K.L. v. Joel Rivera 706018/2021	Civil	Queens County S.Court 88-11 Sutphin Blvd. Jamaica, NY 11435 Queens County S.Court 88-11 Sutphin Blvd. Jamaica, NY 11435		■ Pending □ On appeal □ Concluded ■ Pending □ On appeal □ Concluded	
	Rutledge Apartments v Joel Rivera LT-55713/20-qu	Landlord Tenant				
	Rutledge Apartments v Joel Rivera LT-306493-22/QU	Landlord Tenant	Queens County S.Court 88-11 Sutphin Blvd. Jamaica, NY 11435		■ Pending □ On appeal □ Concluded	
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happene		Date		Value of the property
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No					
	Yes. Fill in the details. Creditor Name and Address	Describe the action th	e creditor took	Date	action was	Amount
	C. Cantol Italiio alla Adal 600	Door no trio action ti	. J.	taker		Amount

Case 1-23-42603-nhl Doc 1 Filed 07/24/23 Entered 07/24/23 18:47:26 Debtor 1 Joel Rivera Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No П Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Description and value of any property

Date payment

or transfer was

Yes. Fill in the details. **Person Who Was Paid**

darren@dalawpc.com

Address

Email or website address made Person Who Made the Payment, if Not You Aronow Law, P.C. **Attorney Fees July 2023** 7600 Jericho Turnpike Suite 115 Woodbury, NY 11797

transferred

Amount of

\$1,500.00

payment

Case 1-23-42603-nhl Doc 1 Filed 07/24/23 Entered 07/24/23 18:47:26 Debtor 1 Case number (if known) Joel Rivera 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο П Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П Nο Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold. before closing or Code) moved, or transfer transferred **TD Bank** XXXX-Closed due to \$16.00 ☐ Checking inactivity; June □ Savings 2023 ☐ Money Market □ Brokerage ☐ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities,

Who else had access to it?

Address (Number, Street, City,

State and ZIP Code)

Describe the contents

Do you still

have it?

cash, or other valuables?

Yes. Fill in the details.

Name of Financial Institution

Address (Number, Street, City, State and ZIP Code)

Nο

Case number (if known)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο ☐ Yes. Fill in the details. Where is the property? Value **Owner's Name** Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No ☐ Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)

Debtor 1

Joel Rivera

Deb	otor 1 Joel Rivera	C:	ase number (if known)				
	☐ A partner in a partnership						
☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation					
	☐ No. None of the above applies. Go to	Part 12.					
	Yes. Check all that apply above and fi	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name	Describe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.				
	Results Marketing Group, LLC	Marketing	Dates business existed EIN: 85-1706935				
	Tree and the state of the state	•					
		NA	From-To 2020-Current				
	■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
Par	t 12: Sign Below						
are t with 18 U		a false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.				
	el Rivera nature of Debtor 1	Signature of Debtor 2					
Dat	e _July 24, 2023	Date					
Did y ■ N □ Y		nent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?				
■ N	you pay or agree to pay someone who is no o es. Name of Person Attach the <i>Bankr</i>						

Fill in this inform	nation to identify your	case:			
Debtor 1	Joel Rivera First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	EASTERN DISTRI	CT OF NEW YORK		
Case number					if this is an ded filing
Official For Statemen		n for Indiv	iduals Filing Under (Chapter 7	12/15
If you are an indiv ■ creditors have	ridual filing under chap	oter 7, you must fill ur property, or	out this form if:	•	
You must file this	er is earlier, unless th	ithin 30 days after y	ot expired. you file your bankruptcy petition or by time for cause. You must also send o		
•	ople are filing together d date the form.	in a joint case, bot	h are equally responsible for supplyir	g correct information. Both	debtors must
	nd accurate as possib our name and case nun		needed, attach a separate sheet to th	is form. On the top of any ad	ditional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims			
4	un that was lintad in Da	ut 4 of Cobodulo De	Conditions Who Have Claims Converd	bu Dramantu (Official Forms 4	OCD) fill in the
information bel		irt 1 of Schedule D:	Creditors Who Have Claims Secured	by Property (Official Form 1	ייסט), זווו in the
Identify the cree	ditor and the property th	nat is collateral	What do you intend to do with the p secures a debt?		on Schedule C?
Creditor's Pe	entagon FCU		☐ Surrender the property.	■ No	
name:			Retain the property and redeem it.	Пу	
Description of	2016 BMW 535i 75,		☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property	Value by www.nad	a.com	Retain the property and [explain]:		
securing debt:			Continue making payments		
Part 2: List Yo	ur Unexpired Persona	Property Leases			
For any unexpired in the information	d personal property lean below. Do not list rea	ase that you listed i	n Schedule G: Executory Contracts at expired leases are leases that are still he trustee does not assume it. 11 U.S.	in effect; the lease period ha	
Describe your un	nexpired personal prop	nerty leases		Will the lease b	a assumad?
2000 ide your ui	ionpirou personai prop	70.1 y 100000		Will the lease b	o abbamba:
Lessor's name: Description of leas	has			□ No	
Property:	ocu			☐ Yes	
Lessor's name:				□ No	
Description of leas Property:	sea			☐ Yes	

De	btor 1	Joel Rivera	Case number (if known)	
	ssor's na		□ No	
		n of leased		
Pro	perty:		☐ Yes	
Les	ssor's na	ame:	□ No	
		n of leased		
Pro	perty:		☐ Yes	
	ssor's na		□ No	
	scriptior perty:	n of leased	Пу	
1 10	рсту.		☐ Yes	
	ssor's na		□ No	
	•	of leased	_	
PIC	perty:		☐ Yes	
	ssor's na		□ No	
		n of leased		
Pro	perty:		☐ Yes	
Pai	rt 3:	Sign Below		
		alty of perjury, I declare that I have in at is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal	J
X		pel Rivera	X	
		Rivera	Signature of Debtor 2	
	Signa	ture of Debtor 1		
	Date	July 24, 2023	Date	

Fill in this	information to identify your case:					irected in this form and	in Form
Debtor 1	Joel Rivera			2A-1Sup	op:		
Debtor 2 (Spouse, if fil	ing)			■ 1. Th	ere is no pres	umption of abuse	
United Sta	ates Bankruptcy Court for the: _Eastern District o	New York		a _l	oplies will be m	o determine if a presurnade under <i>Chapter 7</i>	•
Case num (if known)	ber			□ 3. Th	e Means Test	does not apply now be	
						service but it could ap	ply later.
Officia	l Form 122A - 1			L Che	ick II IIIIS IS a	n amended filing	
	er 7 Statement of Your Cu	rrant Mar	thly Inc	ome			40/40
Спарі	er / Statement of Your Cu	Tent Moi	itiliy iric	OITIE			12/19
attach a se case numb qualifying r	plete and accurate as possible. If two married people parate sheet to this form. Include the line number to er (if known). If you believe that you are exempted from illitary service, complete and file Statement of Exem	which the addition om a presumption	al information a of abuse becau	applies. (Ise you c	On the top of ar	ny additional pages, wri narily consumer debts o	te your name and or because of
Part 1:	Calculate Your Current Monthly Income	a b					
_	t is your marital and filing status? Check one o	nıy.					
	ot married. Fill out Column A, lines 2-11.			0.44			
_	arried and your spouse is filing with you. Fill o			2-11.			
	arried and your spouse is NOT filing with you.	-	•		and D. Para C		
	Living in the same household and are not leg						
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evad	legally separated	under nonbar	kruptcy	law that applie	es or that you and you	
101(10A the 6 mc	e average monthly income that you received from all). For example, if you are filing on September 15, the 6-ronths, add the income for all 6 months and divide the total own the same rental property, put the income from that	nonth period would Il by 6. Fill in the res	be March 1 thro sult. Do not inclu	ugh Augu de any in	ist 31. If the amo	ount of your monthly incomore than once. For examp	ne varied during ble, if both
· ·		_ , ,	, ,	Colum	n A	Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, bill deductions).	and commissio	ns (before all	\$	2,426.67	\$	
	ony and maintenance payments. Do not include mn B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from and	mounts from any source which are regularly pour or your dependents, including child support an unmarried partner, members of your household commates. Include regular contributions from a sound include payments you listed on line 3.	 Include regular your depender 	contributions nts, parents,	\$	0.00	\$	
	ncome from operating a business, profession	or farm					
	, -	Deb	tor 1				
Gros	s receipts (before all deductions)	\$0.00					
Ordin	nary and necessary operating expenses	-\$ 0.00					
	nonthly income from a business, profession, or fa	rm \$ <u>0.00</u>	Copy here ->	•\$	0.00	\$	
6. Net i	ncome from rental and other real property	D-1	4a= 4				
_		\$ 0.00	tor 1				
	s receipts (before all deductions)	-\$ 0.00					
	nary and necessary operating expenses nonthly income from rental or other real property	·	Copy here ->	\$	0.00	\$	
	nontiniy income from rental or other real property	Φ	2007 11010 ->	\$	0.00	\$	
/ INTA							

7. Interest, dividends, and royalties

\$

Case number (if known)

			Column A Debtor 1		Column B Debtor 2 or non-filing spou	ıse
8.	Unemployment compensation		\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a benefit under				
	For you For your spouse	\$ 0.00				
9.	Pension or retirement income. Do not include any a benefit under the Social Security Act. Also, except as not include any compensation, pension, pay, annuity, United States Government in connection with a disability, or death of a member of the uniformed serv pay paid under chapter 61 of title 10, then include tha does not exceed the amount of retired pay to which ye if retired under any provision of title 10 other than cha	stated in the next sentence, do or allowance paid by the ility, combat-related injury or ices. If you received any retired t pay only to the extent that it bu would otherwise be entitled	\$	0.00	\$	
10.	Income from all other sources not listed above. S					
	Do not include any benefits received under the Social received as a victim of a war crime, a crime against hid domestic terrorism; or compensation pension, pay, a United States Government in connection with a disability, or death of a member of the uniformed serv sources on a separate page and put the total below.	umanity, or international or nnuity, or allowance paid by the ility, combat-related injury or	\$	0.00	\$	
			\$	0.00	\$	<u> </u>
	Total amounts from separate pages, if any.	+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add each column. Then add the total for Column A to		2,426.67	+ \$		Total current monthly
Part	2: Determine Whether the Means Test Applies	to You			ı	ncome
12	Calculate your current monthly income for the year	ar Follow these stens:				
12.		•	Con	y line 11 h	nere=> \$	2 426 67
	12a. Copy your total current monthly income from line	7 11	Cob	y iiiie i i i	iere=>	2,426.67
	Multiply by 12 (the number of months in a year)					x 12
	12b. The result is your annual income for this part of t	the form			12b. \$	29,120.04
13.	Calculate the median family income that applies to	you. Follow these steps:				
	Fill in the state in which you live.	NY				
	· · · · · · · · · · · · · · · · · · ·					
	Fill in the number of people in your household.	1				
	Fill in the median family income for your state and size To find a list of applicable median income amounts, g for this form. This list may also be available at the bar	o online using the link specified	in the separa	ate instruc	tions 13. \$	68,814.00
14.	How do the lines compare?					
	14a. Line 12b is less than or equal to line 13.		1, There is i	no presum	ption of abuse.	
	Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top		esumption of	abuse is o	determined by Fo	rm 122A-2.
Part	Go to Part 3 and fill out Form 122A–2. 3: Sign Below					
- en	By signing here, I declare under penalty of perjui	ry that the information on this st	atement and	in anv atta	achments is true a	nd correct.
		, and the monday of the ou		, and		
	χ /s/ Joel Rivera					
	Joel Rivera					

Debtor 1 Joel Rivera

Debtor 1 Joel Rivera	Case number (if known)
Date July 24, 2023 MM / DD / YYYY	
If you checked line 14a, do NOT fill out or file Form 122A-2.	
If you checked line 14b, fill out Form 122A-2 and file i	t with this form.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

	Easterr	n District of New You	:k		
In r	e Joel Rivera		Case N		
		Debtor(s)	Chapte	r <u>7</u>	
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR	DEBTOR(S)
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy	, or agreed to be p	aid to me, for ser	
	For legal services, I have agreed to accept		\$	1,500.0	0_
	Prior to the filing of this statement I have received		\$	1,500.0	<u>0</u>
	Balance Due		\$	0.0	<u>0</u>
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
1 .	■ I have not agreed to share the above-disclosed compensation	ation with any other person	unless they are m	embers and asso	ciates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				of my law firm. A
5.	In return for the above-disclosed fee, I have agreed to rende	r legal service for all aspec	ets of the bankrupto	cy case, including	g:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to redureaffirmation agreements and applications 341 meeting. 	ent of affairs and plan which and confirmation hearing, a ace to market value; ex	h may be required and any adjourned semption planni	; hearings thereof; ng; preparation	n and filing of
ó.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any dischange any other adversary proceeding. These and at \$425.00 per hour. A per diem attorney matthan \$425.00 per appearance.	argeability actions, jud d other actions are incl	licial lien avoida uded in more de	etail in the Reta	ainer Ägreement
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	reement or arrangement for	or payment to me for	or representation	of the debtor(s) in
_	July 24, 2023	/s/ Darren Arono)W		
1	Date	Darren Aronow Signature of Attorn			
		Aronow Law, P.	C.		
		7600 Jericho Tu Suite 115	rnpike		
		Woodbury, NY 1	1797		
		516-762-6701 F	ax: 516-342-536	2	
		darren@dalawp	c.com		

United States Bankruptcy Court Eastern District of New York

In re	e Joel Rivera		Case No.	
		Debtor(s)	— Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: July 24, 2023

/s/ Joel Rivera

Joel Rivera

Signature of Debtor

Date: July 24, 2023

/s/ Darren Aronow

Signature of Attorney

Darren Aronow 4094074 Aronow Law, P.C. 7600 Jericho Turnpike Suite 115 Woodbury, NY 11797 516-762-6701 Fax: 516-342-5362

USBC-44 Rev. 9/17/98

Barclays Bank Delaware Attn: Bankruptcy 125 South West St Wilmington, DE 19801

Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Citibank Citicorp Cr Srvs Attn: Bankruptcy Po Box 790040 St Louis, MO 63179

Con Edison 4 Irving Place 9th floor New York, NY 10003

Credit One Bank Po Box 98872 Las Vegas, NV 89193

Daniel S. Szalkiewicz 116 Pinehurst Avenue A44 New York, NY 10033

David A. Shapiro 118-35 Queens Blvd. Suite 400 Forest Hills, NY 11375

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Fortiva Attn: Bankruptcy Po Box 105555 Atlanta, GA 30348 Genesis FS Card Svs. Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Green Dot Bank Attn: Bankruptcy Po Box 5100 Pasadena, CA 91117

Horing Welikson Rosen & D 11 Hillside Avenue Williston Park, NY 11596

K.L.
c/o Daniel Szalkiewicz
23 W 73rd Street
New York, NY 10023

Pentagon FCU Attn: Bankruptcy Po Box 1432 Alexandria, VA 22313

Queens County ourt 88-11 Sutphin Blvd. Jamaica, NY 11435

Rutledge Apartments LLC 62-25 Woodhaven Blvd Rego Park, NY 11374

TD Bank, N.A. Attn: Bankruptcy 1701 Rt 70 East Cherry Hill, NJ 08003

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

DEBTOR(S): Joel Rivera

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Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure oncerning Related Cases, to the petitioner's best knowledge, information and belief:				
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]				
NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.				
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:				
1. CASE NO.: JUDGE: DISTRICT/DIVISION:				
CASE STILL PENDING (Y/N): [If closed] Date of closing:				
CURRENT STATUS OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)				
(Discharged/awaiting discharge, confirmed, dismissed, etc.)				
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):				
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:				
2. CASE NO.: JUDGE: DISTRICT/DIVISION:				
CASE STILL PENDING (Y/N): [If closed] Date of closing:				
CURRENT STATUS OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)				
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):				
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:				
3. CASE NO.: JUDGE: DISTRICT/DIVISION:				
CASE STILL PENDING (Y/N): [If closed] Date of closing:				

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Di	ischarged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "SCHEDULE "A" OF RELATED CASE:	A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals v be eligible to be debtors. Such an individual will be require	who have had prior cases dismissed within the preceding 180 days may not d to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATT	ORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Yor	k (Y/N): Y
CERTIFICATION (to be signed by pro se debtor/petitioner	or debtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form.	case is not related to any case now pending or pending at any time, except
/s/ Darren Aronow	
Darren Aronow 4094074 Signature of Debtor's Attorney Aronow Law, P.C. 7600 Jericho Turnpike	Signature of Pro Se Debtor/Petitioner
Suite 115 Woodbury, NY 11797 516-762-6701 Fax:516-342-5362	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the

dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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